State of Idaho DEPARTMENT OF INSURANCE

C.L. "BUTCH" OTTER

Governor

700 West State Street
Boise, Idaho 83720
Phone (208)334-4250
FAX # (208)334-4398

WILLIAM W. DEAL

Director

INFORMATION STATEMENT

(Must be Typed)

Name Plan will be using in this s	tate (if different from above):			
Physical Address:				
Street:				
City:	State:	Zip: _		
Administrative Office Contact and Mailing Address:				
General Contact and Title:				
Street or P.O.:				
City:	State:	Zip: _		
Phone:	FAX:			
Гoll-Free Telephone Number:	E-mail address			
Annual Statement Filings Contact and Mailing Address:				
Contact and Title:				
Street or P.O.:				
City:	State:	Zip: _		
Phone:	FAX:			
Toll-Free Telephone Number: _	E-mail address			
Consumer/Government Relations Contact and Mailing Address				
Contact and Title:				
Street or P.O.:				
City:	State:	Zip: _		
Phone:	FAX:			
Toll-Free Telephone Number: _	E-mail address			

IDAHO DEPARTMENT OF INSURANCE INFORMATION STATEMENT

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7.	Claims Administrator:			
	Contact and Title:			
	Street or P.O.:			
	City:	State:	Zip:	
	Phone:	FAX:		
	Toll-Free Telephone Number	F-mail addres	2	